



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of
Guenter Brune et al.
Serial No: 09/934,370
Filed: August 22, 2001
For: LOCATING ARRANGEMENT AND METHOD
USING BORING TOOL AND LOCATING
SIGNALS

Examiner: Reena Aurora
Art Unit: 2862
Attorney Docket: DCI-21
Date: October 6, 2003

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CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on **October 6, 2003**.

Signed:

Jay R Beyer

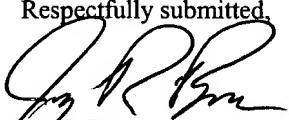
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SIR: Transmitted herewith is an Amendment for the above application.

Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established
 No additional fee is required.
 Postcard included

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	NON- SMALL ENTITY
Total Claims	* 45	Minus	**47	0	
Indep. Claims	* 5	Minus	*** 5	0	
First Presentation of Multiple Dependent Claim(s)					
	*	If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.			
	**	If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.			
	***	If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.			
		Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to 37 C.F.R. § 1.136(a).			
		Please charge my Deposit Account No. <u>19-1685</u> (Order No. DCI-21) the amount of \$_____ to cover the additional claims fee. A <u>duplicate copy of this sheet is enclosed</u> .			
	<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <u>19-1685</u> (Order No. DCI-21) (a <u>duplicate copy of this sheet is enclosed</u>):			
	<input checked="" type="checkbox"/>	Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.			
	<input checked="" type="checkbox"/>	Any extension or petition fees under 37 C.F.R. § 1.17.			

Respectfully submitted,

Jay R Beyer
Registration No. 39,907